

**Department of Mental Health and Addiction Services
RFQ #DMHAS-CSD-SOR-MES-2018**

**Post-Conference Questions and Answers
October 31, 2018**

1. **Question:** What is the preferred method to submit a Letter of Intent?

Answer: With regard to the inquiry on submissions of Letters of Intent, please refer to Section I.C.7. of the Request for Proposal (RFP) below for additional information.

7. Letter of Intent. *A Letter of Intent (LOI) is required by this RFP. The LOI is non-binding and does not obligate the sender to submit a proposal. The LOI must be submitted to the Official Contact by US mail, fax, or e-mail by the deadline established in the Procurement Schedule. The LOI must clearly identify the sender, including name, postal address, telephone number, fax number, and e-mail address. It is the sender's responsibility to confirm the Department's receipt of the LOI. Failure to submit the required LOI in accordance with the requirements set forth herein shall result in disqualification from further consideration.*

2. **Question:** Does the following statement apply to the Mobile Employment Services (MES) RFP as it appears in another State Opioid Response (SOR) RFP, "Also, any organization that has received STR grant funding from DMHAS in the past two years is not eligible for this funding, except as a fiduciary for another organization."?

Answer: No, the aforementioned statement above does not apply to the MES RFP.

3. **Question:** Will the Department share the number of DMHAS funded Recovery Houses, DMHAS funded Halfway Houses and DMHAS Supported Recovery housing in each town?

Answer: Please see information on MES DMHAS Funded Recovery Houses, Halfway Houses and Supported Recovery Housing by town below.

Recovery Houses:

Region 1: CASA, Bridgeport; Regional Network of Programs, Bridgeport

Region 2: Columbus House, New Haven; The Connection, New Haven

Region 3: Community Health Resources, Willimantic

Region 4: Intercommunity, Hartford; Mercy Housing & Shelter, Hartford

Region 5: McCall Foundation, Torrington; Wellmore, Waterbury

Halfway Houses:

Region 1: CASA, Bridgeport

Region 2: None

Region 3: SCADD, New London and Norwich

Region 4: Intercommunity, Glastonbury and Hartford; Youth Challenge, Hartford

Region 5: McCall Foundation, Torrington

Supported Recovery Housing:

Region 1: Pacific House, Stamford

Region 2: Step Up Inn, West Haven; Believe in Me Empowerment Corp., Hamden and New Haven; Stepping Stone House, Meriden and Middletown; Evergreen Family Oriented Tree, New Haven; RHEMA Community Development Corp., New Haven

Region 3: Community of Hope, Groton; ACURE, LLC, New London and Willimantic; Bethsaida Community, Inc., Norwich; Perception Programs, Willimantic; SCADD, Norwich; The Safe House, Willimantic

Region 4: Sober Solutions, Enfield, Manchester, and East Hartford; Community Partners in Action, Hartford; Intercommunity, Hartford; Sober Solutions, Manchester; Coram Deo, New Britain; Vita Pulita House, New Britain

Region 5: Key Recovery Sober Community Home, Torrington; Sober Solutions, Waterbury

4. **Question:** Please confirm that if the applicant is a current DMHAS contractor the applicant does not have to submit letters of reference or a financial audit (appendices 4 and 7).

Answer: Please refer to Section III. C. 2. e. and Section III. D. 1. of the RFP.

e. References: *If you do not currently or have not in the past three years provided contracted services to the Department, at least three (3) reference letters must be included in Section H of the proposal to support the description of your experience in providing these services. Letters must include agency name, contact name, mailing address, phone number and*

email address of the writer. Letters must also include the nature of the writer's relationship with the proposer and the extent of the proposer's provision of services to the writer. **This is NOT** a letter of support. The writer must be able to detail a prior relationship of services provided by the proposing agency.

1. Financial Requirements: Proposers must submit cover letters from their auditor for the last three (3) annual audits of their agency and a copy of their most recent financial audit, included in Section H of the proposal. If less than three (3) audits were conducted, detail must be provided as to why, and any supporting documentation assuring the financial efficacy of the applicant agency should be included (i.e. accountant prepared financial statement, a tax return, etc.).

If the three (3) most recent audits are available via the Office of Policy and Management's EARS system, such may be noted in the proposal and a hardcopy of the audit cover letters need not be provided.

5. **Question:** Will the Department be looking for contractors to provide MES on site at Residential Treatment programs?

Answer: No, Residential Treatment programs are not included in this RFP.

6. **Question:** Please provide a list of all DMHAS facilities where contractors would be expected to deliver services under this RFP.

Answer: Please see question #3 above for a listing of DMHAS contracted facilities that could be served by this RFP. However it should be noted that those responding to this RFP are not expected to serve ALL facilities in their respective regions.

7. **Question:** The RFP states the submission of multiple proposals is not an option with this procurement- does that mean we are limited to proposing to serve only one region?

Answer: Yes.

8. **Question:** If we are interested in providing services in two regions and allowed to make that proposal, can that be included in one proposal?

Answer: Providing services in two regions would constitute two proposals and multiple proposals are not allowed for this RFP.

9. **Question:** On page 18 the outline states that a minimum of 3 references must be provided (under E. Appendices and Forms, 4)- but page 17 states that applies only to those not currently or within the past 3 year having provided services to DMHAS. Which instructions should we follow?

Answer: Proposers do not have to submit letters of reference if they are already DMHAS contracted agencies. If an agency is not a current contractor with DMHAS, then they are required to submit 3 letters of reference.

10. **Question:** Could you clarify what is expected under the Work Plan vs. the Implementation Plan?

Answer: The Work Plan and the Implementation Plan can be considered one in the same.

11. **Question:** What are the employment outcomes associated with this program?

Answer: The current DMHAS benchmark for all employment programs is 35%.

12. **Question:** How long is it anticipated that individuals being supported will continue to receive services? The RFP states that a minimum capacity for the year would be to serve 100, which would mean short term services for those being supported.

Answer: Of course turn-around time for individuals being served will vary based on their individual situations but the average time expected is 45-60 days.

13. **Question:** Is the intended budget \$50,000 per year?

Answer: The intended budget is \$100,000 per year.

14. **Question:** What are the benchmarks or outcomes required?

Answer: See question 11 above.

15. **Question:** Is one 40-hour per week FTE required?

Answer: One 40-hour FTE is required however time can be split if necessary to meet the needs of the program.

16. **Question:** Would we be able to check employment outcomes against Department of Labor wage data?

Answer: Currently, we do not have the capabilities to obtain wage data from DOL.

17. **Question:** The RFP states that this project will be funded for two years; is there a plan to fund this project beyond that period?

Answer: Any additional funding beyond the two years is unknown at this time.

18. **Question:** What is the source of funding for this project?

Answer: Funds related to this RFP are federally funded through the Substance Abuse and Mental Health Services Administration.

19. **Question:** Must we provide original signed grant forms and appendices (gift affidavit, consulting agreement, etc) with our MES proposal or are copies okay?

Answer: Per RFP # DMHAS-CSD-SOR-MES 2018, the following is required per section I.C.10.:

An acceptable submission must include the following:

- one (1) original proposal;
- five (5) conforming proposal copies; and
- one (1) conforming electronic copy of the original proposal.

Therefore, original forms are required.

20. **Question:** On page 20 of the proposal outline, the Executive Summary is required in both E and F.1. Which place is it preferred?

Answer: The Executive Summary should be placed first as part of the Main Proposal.

21. **Question:** What type of data are you looking to capture?

Answer: The number of people served, employment rate, how long it takes to connect to an employer, how long it takes to connect to a job, place of employment, type of job, full time/part time wages. Additional data may be required as program progresses.

22. **Question:** Besides the 35 a week employment goal, can you share the benchmarks you are looking to measure?

Answer: The current benchmark for employment services is 35% employed for the quarter. Other benchmarks may include the number of people served based on the number of slots for the program and contact with employers – at least four contact per week.

23. **Question:** What information are you looking to have included in the intake process?

Answer: Please see these links for some possible resources:

https://www.ct.gov/connect-ability/lib/connect-ability/serviceresources/sect1_toolkit.pdf

<https://ipsworks.org/index.php/library/>

24. **Question:** Is the client already going to be tracked by DMHAS since they are a resident at a DMHAS funded location? Will those clients be attributed to other nonprofits?

Answer: Those clients will also be attributed to your employment program which will have a separate DDAP number.

25. **Question:** Is there a preferred set of educational requirements for the employment specialist?

Answer: No, standard requirements are acceptable although the organization's guidelines should be utilized for hiring.

26. **Question:** Do we still continue to service a client if they move out of DMHAS housing but are still in the area during the course of working with them?

Answer: Yes, DMHAS would require services to continue in order to assist them and refer them to other Mental Health organizations in the state as needed to connect them to a job.

27. **Question:** What is considered "self-referred"?

Answer: Since these are mobile services, there is the possibility that a client may hear about the program and approach employment specialist with the desire to enter the program. The employment program should require documentation of the diagnosis related to opioid use.

28. **Question:** Page 16 of the RFP refers to "Possess mobile applications..." within the last bullet point. Is it possible to clarify the nature of "mobile applications"?

Answer: This refers to the use of cell phones, laptops, etc. to utilize applications anywhere and at any time.

29. **Question:** Please clarify the response to Question #6 above which indicates that "those responding to this RFP are not expected to serve ALL facilities in their respective regions."

Answer: Below is a listing of the recovery houses and half-way houses by region. It is the hope that as many can be served as possible within the region however some regions have more facilities than others and this may not be possible.

Region 1: Chemical Abuse Services Agency (6, 10) ,Recovery Network of Programs (11);

Region 2: Columbus House (10), The Connection (27);

Region 3: Community Health Resources (10), SCADD (10, 11, 13);

Region 4: Intercommunity Recovery Centers (15, 36, 14), Mercy Housing and Shelter (8) , Youth Challenge of CT(7); and

Region 5: McCall Foundation (12, 14), Midwestern CT Council on Alcoholism(16), Ministry of the High Watch (50), Mountainside Lodge (50), Wellmore(3, 15, 8, 23).

The following are statewide capacities for Supported Recovery Housing: A-Cure (20), Believe in Me Empowerment Corp. (17), Bethsaida Community (3), Community of Hope INC. (5), Community Partners in Action(4), Coram Deo (17), Evergreen Family Oriented Tree (22), Intercommunity (12), Key Recovery Sober Community Homes (10), Pacific House (5), Perception Programs (3), RHEMA Community Development Corp of CT (4), Sober Solutions (60), SCADD (10), Step Up Inn (4), Stepping Stone House (24), The Safe House (17), Vita Pulita House (5).

30. **Question:** What is the expectation regarding the Opioid Use Disorder diagnosis? In ICD-10 code? What type of substantiation is requested?

Answer: The ICD-10 Code is acceptable/referral from the Halfway House, Recovery House, Supported Recovery Housing.

31. **Question:** Do all clients served have to reside in the identified DMHAS housing?

Answer: Yes, they must reside in DMHAS housing.

32. **Question:** What is the capacity of DMHAS funded Sober & Halfway Houses?

Answer: Please refer to question #29 above.

33. **Question:** Is this under the auspices of parole and probation?

Answer: No

34. **Question:** Is there an expectation for this program to follow the IPS model?

Answer: There is no expectation to use the IPS model as written but it can of course be used as a guide for designing your programs.

35. **Question:** Are fidelity reviews expected for this RFP?

Answer: No, they are not required for this RFP.

36. **Question:** Will Providers be required to enter information into DDAP?

Answer: Yes

37. **Question:** Capacity of 100?

Answer: Please refer to numbers in question #12 above.

38. **Question:** - Are there specific forms for intake?

Answer: Please refer to question #23 above for resources.

39. **Question:** Are you looking for the MES to use DMHAS developed/sponsored vocational profiles or are profiles that are nationally recognized acceptable?

Answer: Please refer to question #23 for some resources. Many employment programs use profiles that they believe are best suited for their programs. There is no specific DMHAS sponsored profile.

40. **Question:** At the bidders conference you noted that you would provide vocation profile resources. Will you please provide links to some of the preferred profiles?

Answer: Please refer to question #40 above.

41. **Question:** The RFP notes that preference will be given to proposals with non-traditional hours. Would this include a preference for weekend hours or is the hope non-traditional hours within a Monday-Friday schedule?

Answer: Either is acceptable.

42. **Question:** Is the submission of MOU's required for this proposal?

Answer: No, it is not required for this proposal.

43. **Question:** Page 18 notes that "up to \$10,000 may be set aside for the cost of work-related items such as uniforms, certifications, equipment, educational materials and travel support". Are these funds to be exclusively for clients or for clients and the program/staff person?

Answer: They are for the Clients.

44. **Question:** What will the referral process for the MES services look like?

Answer: That will be determined by DMHAS and the providers who receive the award for this grant.

45. **Question:** Section A.1 states that DMHAS is "seeking proposals to implement a program that would provide mobile services onsite at DMHAS Funded houses" however, in section A.2 it also states that "services are intended for individuals who are in early recovery", does this mean that the clients served by the MES program must be residing in the DMHAS funded Recovery, Halfway or Supported Recovery housing in order to receive these services?

Answer: Yes, clients but be a part of the programs listed in this RFP, DMHAS funded Recovery Houses, Halfway Houses, and Supported Recovery Housing.

46. **Question:** Section 3.iii. states that "individuals with Opioid Use Disorder are eligible for MES" ... "Individuals can be referred by treatment providers or can also self-refer", do individuals with opioid use disorders that are referred (either by a provider or themselves) have to be actively participating in a DMHAS funded Recovery, Halfway or Supported Recovery Housing program in order to be considered eligible for the Mobile Employment Service?

Answer: Please refer to question #46 above.

47. **Question:** If there is a client with a co-occurring mental health disorder already enrolled in the IPS model, can that individual also count towards the Mobile Employment services program?

Answer: No, the client would be in either one employment program or the other – cannot be in two employment programs at the same time.